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## **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF C		COMMITTEE		,			
10/02/10	Ever	ett 1	Fair Ci	hild Cal	npaign			
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE				
Everete Faire	hild							
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Phone			
4704 Whispering Hills	LN HIX	50K	TN	37343	423-877-2750			
4.b. CANDIDATE'S HOME ADDRESS (if differen	nt than 4.a.)							
Street or Rural Route	City		State	Zip Code	Phone			
OFFICE SOUGHT (include district number,	if applicable)	6. NAME	OF POLITICAL	TREASURER (may be	e candidate)			
	6. NAME OF POLITICAL TREASURER (may be candidate)  Bob Freeman							
7. CATEGORY OR REPORT (Check one)			,	- men				
FIRST SECOND THIRD	☐ FOURTH	PRE-	PRE-	MID-YEAR	YEAR-END			
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY	GENERAL	SUPPLEMENTAL ORTING PERIOD	SUPPLEMENTAL			
7/27/10		O.D. LINDING	9/20/	OKTINGFERIOD				
9. (Check one)		l	130/1	0				
a. This campaign is exempt from detail	ed disclosure becaus	se contribution	s (including in-k	(ind) received total \$1 (	MO or less AND expendi			
a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)								
b. This campaign is required to file a de	etailed financial discl	osure because	contributions (	including in-kind) recei	ved total more than \$1,000			
and/or expenditures total more than	\$1,000 for this repor	ting period.						
10. I/we do solemnly swear or affirm that the i	nformation contained	d in this camp	aign financial d	isolasura rapart ia trua	and that this asset is			
accurate accounting of campaign contributi	ons and expenditure	es required to b	be reported by t	he candidate committe	e by the Campaign			
Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other no	swear or affirm that npolitical purpose as	no campaign defined by the	contributions ha e federal interna	ave been expended for al revenue code	the personal financial			
1 5 5 2 311	2/1		11	10				
Curett & Fairchild 10/8/10 Takes K/alleman 10/12/10								
signature of cañdidate	date		signature	of political treasurer	date			
11. WITNESS SIGNATURE								
00 0000	, ,	,	21					
Charlotte Mullis-Morgan	10/8/10		harlos	te Mellis 1	loida 10/12/10			
signature of witness	date		sign	ature of witness	date			
12. SUMMARY								
				13/1 2	3			
a. BALANCE ON HAND LAST REPORT					-			
b. TOTAL RECEIPTS THIS PERIOD				\$00.02	)			
c. TOTALDISBURSEMENTS THIS PERIOD				1366.2	3			
c. TOTAL DISBURSEMENTS THIS PERIOD	••••••		••••••••••••	\$	_			
d. BALANCE ON HAND (12.a. plus 12.b.								
TOTAL LOANS SUFFERNISH					Land .			
e. TOTAL LOANS OUTSTANDING	12:33	Md 8-1	20.0102		\$_none			
f. TOTAL OBLIGATIONS OUTSTANDING .	N.	UISSILILIO	1		· Trone			
	J. 5.1	ELLUM			Φ			
	0.0	PULLIMA	1					



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## SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD					
Everett Fairchild Campaign RECEIPTS	FROM: 7/27/12 TO: 9/30/10					
15. CONTRIBUTIONS (other than loans and interest)						
a. Unitemized Contributions (\$100 or less from each source this period)	\$					
b. Itemized Contributions (over \$100 from each source this period)	\$					
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	ss					
16. LOANS RECEIVED THIS REPORTING PERIOD	\$					
17. INTEREST RECEIVED THIS REPORTING PERIOD	ss					
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	ss					
DISBURSEMENTS						
19. EXPENDITURES (other than loan payments)						
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	.g., printing, postage, gasoline)					
VFW \$ 25°	DONSTION					
Bethel Bible Village \$ 61.2	3 Donation					
Chattanooga Fire Fighters \$ 50.0	D D NA					
Hixson sports Club \$ 100.	o Gist Configurates					
honghorn \$ 70.0	Sor 2 WENTEDUS.					
\$	501					
\$						
s						
Total of Expenditures (\$100 or less each payee)	\$ 306,23					
b. Itemized Expenditures (Over \$100 each payee this period)						
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 300.00					
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	s 1366.23					
22.IN-KIND CONTRIBUTIONS						
Unitemized in-kind contributions (\$100 or less from each source this period)	.\$O					
b. Itemized in-kind contributions (over \$100 from each source this period)\$						
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	_					
23. OBLIGATIONS						
a. Unitemized Obligations Outstanding (\$100 or less each)	\$0					
b. Itemized Obligations Outstanding (Over \$100 each)						
c. FOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown intem						
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## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE  Evenett Fourthild Campaign  2. REPORT COVER FROM: 7/27/10					TO: 9/30/10			
	Amount							
TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)      COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)								
First Name	Middle Na		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name  June 7 Fres Gress		Adoutising		\$600				
Address 400 E 11th 5t		Marco (	)	7 600				
Address 400 E 11th 52  City Chattaneoga	State	Zip Code 37403						
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name	Last Name/Business Name				. 0			
Address The Gran		A dvertising	5	160				
Juner Free Press Address 400 E 11th 5th City Chattanoga	State TN	Zip Code 37403						
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name		*						
Address								
City	State	Zip Code						
First Name	NE dalla Na							
	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
TOTAL ITEMIZED EXPENDITURES     (Carry forward to item 3. of next page if additional pages     (If this is the last page of expenditures, this amount must					\$760 °°			